PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

(0655793

| | 750.00 |
|--|------------------------|
| TOTAL CHARGEABLE CLAIMS minus 20= * X\$ 9= OR X\$18 INDEPENDENT CLAIMS minus 3 = X42= OR X84 MULTIPLE DEPENDENT CLAIM PRESENT OR +140= OR +280 * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTH | - 750 ER THAN |
| INDEPENDENT CLAIMS minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II OR X42= OR X42= OR X84: OR TOTAL OR TOTAL OTH | - 750 ER THAN |
| * If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AS AMENDED - PART II **TOTAL **TOTA | - 750 ER THAN |
| * If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AS AMENDED - PART II **TOTAL OR TOTAL OTH | - 750 ER THAN |
| CLAIMS AS AMENDED - PART II OTH | R THAN |
| | |
| (O. I | L ENTITY |
| (Column 2) (Column 2) | |
| REMAINING AFTER PREVIOUSLY PAID FOR PRESENT EXTRA Total * Minus ** = X\$9= OR X\$18 Independent * Minus *** = X42= OR | ADDI- TIONAL FEE |
| Y Total * Minus ** = X\$ 9= OR X\$18 | = |
| Independent * Minus *** = X42= OR X84 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR +280 | : |
| TOTAL OR ADDIT. FEE OR ADDIT. | |
| ADDIT. FEE | |
| CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR Total * Minus *** = X\$ 9= OR X\$18 | ADDI- TIONAL FEE |
| Total * Minus ** = X\$ 9= OR X\$18 | = |
| Independent * Minus *** = X42= OR X84 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR +280 | = |
| TOTAL OR TO ADDIT. FEE OR ADDIT. | |
| (Column 1) (Column 2) (Column 3) | |
| CLAIMS REMAINING AFTER AMENDMENT Total Total * Minus *** PRESENT EXTRA PRESENT EXTRA PRESENT EXTRA PRESENT EXTRA PRESENT EXTRA PRESENT EXTRA PRESENT EXTRA RATE TIONAL FEE X\$ 9= | ADDI- TIONAL FEE |
| Total * Minus ** = X\$ 9= OR X\$18 | = |
| Independent * Minus *** = X42= OR X84 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | EE |